FPATENT APP	BD	Application or Dock t Number							
		Da	150	2053	5				
CLAIMS AS FILED - PART I (Column 1) (Column 2)					LL ENTITY		OTHE	RTHAN	
FOR NUMBER FILED			NUMBER EXTRA		E FEE	OR		ENTITY	
BASIC FEE					E FEE 345.00	H.,	RATE	FEE	
TOTAL CLAIMS 7 minus 20		AL AL BO LA LA COLLEGE CONTRACTOR	A STATES			HOR		690.00	
INDEPENDENT CLAIMS 2 minus 3		63-1-)=	OR	X\$18=	<u> </u>	
MULTIPLE DEPENDENT CLAIM PRESENT				X39	<u> </u>	OR	X78=		
	+130	=	OR	+260=					
* If the difference in column 1 is less than zero, enter "0" in column 7 TOTAL 745 OR TOTAL									
~	IS AS AMENDE	D - PART II	(22	/	7		OTHER	THAN	
	lumn 1) AIMS	(Column 2)	(Column 3)	SMA	LL ENTITY	OR	SMALL	ENTITY	
	IAINING P	NUMBER PREVIOUSLY	PRESENT EXTRA	RATI	ADDI- TIONAL		RATE	ADDI- TIONAL	
Total .	NDMENT Z	PAID FOR	-		FEE		TONIC.	FEE	
Total	Minus	.30	= 8	X\$ 9	- .	OR	X\$18=	144	
FIRST PRESENTATION	Minus	OFAIDENT CLAIR	-	X39=		OR	X78=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+260=	•	
	•		•	+130:		OR	YOTAL		
(Coh	umn 1)	(Column 2)	(Column 3)	ADDIT. F	EE	JOR ,	ADDIT. FEE	14.4	
REM	AIMS AINING	HIGHEST	PRESENT	-	ADDI-	1		ADDI-	
Al Al	TER IDMENT	BODIOLICIA	EXTRA	RATE	TIONAL		RATE	TIONAL	
Total - 4	& Minus	. 38	- 10	XS/	FEE OCAL		Year	FEE	
Independent • /	O Minus	9	= 1	XIM	4)-	OR	X\$18=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					100	OR	X78=		
1) -				+130=	7	OR	+260=		
2/1/2			•	TOTA ADDIT, FE		OR ,	TOTAL ODIT FEE		
(Column 2) (Column 3)									
TAPE SERVICE REMA	UNING	HIGHEST NUMBER	PRESENT		ADDI-	ſ		ADDI-	
	TER DMENT	PREVIOUSLY PAID FOR	EXTRA	RATE	TIONAL FEE		RATE	TIONAL	
Total • 🗸	Minus	- 48	=	X\$ 9=		OR	X\$18=		
Independent . C	Minus	··· /ð		X39=				\	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X39= OR X78=								4	
if the entry in column 1 is te	+130=		QA	+260=					
if the "Highest Number Prev "If the "Highest Number Prev	ADDIT. FE		OR A	TOTAL DOIT. FEE					
The Highest Number Previ	ously Paid For (Total or	Independent) is the	highest number k	ound in the a	ppropriate box	in colu	mny.		